	PATENT (APPLICATIO	N FFF DI	SD	Application or Docket Number									
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000									1 / 899438					
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER THAN SMALL ENTITY			
TOTAL CLAIMS			23		(*)		RA	E	FEE		RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			3) minus 20=		. 3,		X\$	9=		OR	X\$18=	54		
INDEPENDENT CLAIMS			minus 3 =		9		X40=			OR	X80=			
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT		/			+135=		OR	+270=			
* If the difference in column 1 is less than zero, enter "0" in column 2						TOT	AL		OR	TOTAL	764			
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY O			OR	OTHER SMALL I			
∀		CLAIMS REMAINING		HIGH NUM	HEST IBER	(Column 3) PRESENT			ADDI-]		ADDI-		
JENT		AFTER AMENDMENT			OUSLY FOR	EXTRA	RAT	<u>-</u> -	TIONAL FEE		RATE	TIONAL FEE		
AMENDMENT	Total	*	Minus	**		=	X\$ 9)= 		OR	X\$18=			
	Independent * FIRST PRESENTATION OF M		Minus ***		TOLAIM	=	X40	=		OR	X80=			
	THOTTHEOL	WATION OF MA	JUINTEL DEI	CINDLIA	LOCAIN		+13	<u></u>		OR	+270=			
							TC ADDIT.	TAL		OR	TOTAL, ADDIT. FEE			
					(Column 2) (Column 3)					• 🛎		**		
NDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=	X\$ 9)=		OR	X\$18=			
AMEN	Independent	*	Minus	***	T CL AINA	=	X40	=		OR	X80=			
	FIRST PRESENTATION OF MULTIPLE DEPEN				NDENT CLAIM			 5=		OR	+270=			
							TC ADDIT.	TAL			TOTAL ADDIT. FEE			
(Column 1) (Column 2) (Column 3)								L.,			ADDII. 1 EE,			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST 1BER OUSLY FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=	X\$ 9)=		OR	X\$18=			
	Independent	*	Minus	***	- OL AINA	<u> -</u>	X40=	=		OR	X80=			
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+135	 =		OR	+270=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."											TOTAL			
***	If the "Highest Nu	mber Previously Pa	aid For" IN THI	IS SPACE	is less tha	an 3, enter "3."	אטטוו.		propriate box		ADDIT. FEE I lumn 1.			